

**ANTIOCH CHURCH OF CHRIST
COMMIT TO PARTNERSHIP FORM**

PLEASE PRINT

Mr. Mrs. Ms. **FIRST NAME:** _____ **LAST NAME:** _____
_____ Single _____ Married _____ Single Again _____ Widowed

ADDRESS: _____

CITY: _____ **ZIP CODE:** _____

CELL PHONE: _____ **CARRIER:** _____ **HOME PHONE:** _____

WORK PHONE: _____ **DATE OF BIRTH:** _____

EMAIL ADDRESS: *(To receive Antioch Updates & Event Confirmation)* _____

SPOUSE INFORMATION *(If married and spouse is also becoming a member)* **DATE MARRIED:** _____

NAME _____ *Does not attend with me*

CELL PHONE: _____ **WORK PHONE:** _____

DATE OF BIRTH: _____ **EMAIL ADDRESS:** _____

<p>Baptism: Have you been baptized by immersion? _____ YES _____ NO If Yes: Approximate date _____ Location: _____ If No: _____ I want to be baptized at Antioch _____ I want more information about baptism as my next step</p>

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HAVE YOU REGULARLY ATTENDED OR BEEN A CHURCH MEMBER ELSEWHERE? _____ **YES** _____ **NO**
Approx. Date Church Name City/State Areas of Involvement?

<p style="text-align: center;">I (We) gladly and willingly submit to the guidance and leadership of the Antioch Church of Christ Elders and those appointed by the Elders.</p> <p style="text-align: center;">I (we) have read the FAMILY MEMBERSHIP COMMITMENT.</p> <p style="text-align: center;">I (We) permit Antioch Church of Christ to use my/our image(s) in Media Materials.</p> <p>Signed: _____ Date: _____</p> <p>Signed: _____ Date: _____</p>
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PLEASE COMPLETE CHILDRENS' INFORMATION ON OTHER SIDE

CHILDREN'S INFORMATION

NAME: (Include last name if different) _____

Goes by: _____ Sex (M/F) _____

Birth Date (Please include year) _____ Baptized? (Y/N) _____ Approx. Date _____

School _____ Grade _____

Cell Phone: _____ Carrier: _____ Receive Texts (Y/N) _____

Email _____

NAME: (Include last name if different) _____

Goes by: _____ Sex (M/F) _____

Birth Date (Please include year) _____ Baptized? (Y/N) _____ Approx. Date _____

School _____ Grade _____

Cell Phone: _____ Carrier: _____ Receive Texts (Y/N) _____

Email _____

NAME: (Include last name if different) _____

Goes by: _____ Sex (M/F) _____

Birth Date (Please include year) _____ Baptized? (Y/N) _____ Approx. Date _____

School _____ Grade _____

Cell Phone: _____ Carrier: _____ Receive Texts (Y/N) _____

Email _____

NAME: (Include last name if different) _____

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School _____ Grade _____

Cell Phone: _____ Carrier: _____ Receive Texts (Y/N) _____

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NAME: (Include last name if different) _____

Goes by: _____ Sex (M/F) _____

Birth Date (Please include year) _____ Baptized? (Y/N) _____ Approx. Date _____

School _____ Grade _____

Cell Phone: _____ Carrier: _____ Receive Texts (Y/N) _____

Email _____